

APPLICATION DATA SHEET

Application Information

Application Number::	Not yet assigned
Filing Date::	Not yet assigned
Application Type::	Divisional
Subject Matter::	
CD-ROM or CD-R?::	No
Number of CD Disks::	None
Number of Copies of CDs::	None
Sequence Submission?::	N/A
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	Optimal Windows for Obtaining Optical Data for Characterization of Tissue Samples
Attorney Docket Number::	MDS-034DV
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	17
Small Entity?::	Yes
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Given Name::	Kevin
Middle Name::	T.
Family Name::	Schomacker

Name Suffix::
City of Residence:: Maynard
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: 6 George Street
City of Mailing Address:: Maynard
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 01754

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Given Name:: Alex
Middle Name::
Family Name:: Zelenchuk
Name Suffix::
City of Residence:: Stoughton
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: 15 Orangewood Drive
City of Mailing Address:: Stoughton
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 02072

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Given Name:: Ross
Middle Name::
Family Name:: Flewelling
Name Suffix::
City of Residence:: Chelmsford
State or Province of Residence:: MA

Country of Residence:: USA
 Street of Mailing Address:: 1 Eagle Cliff Road
 City of Mailing Address:: Chelmsford
 State or Province of Mailing Address:: MA
 Country of Mailing Address:: USA
 Postal or Zip Code of Mailing Address:: 01824

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: USA
 Given Name:: Howard
 Middle Name::
 Family Name:: Kaufman
 Name Suffix::
 City of Residence:: Newton
 State or Province of Residence:: MA
 Country of Residence:: USA
 Street of Mailing Address:: 2 Newbury Terrace
 City of Mailing Address:: Newton
 State or Province of Mailing Address:: MA
 Country of Mailing Address:: USA
 Postal or Zip Code of Mailing Address:: 02459

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Divisional	10/295,794	11/15/02
10/295,794	Non-prov. of Prov.	60/394,696	07/09/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

Assignee Information

Assignee Name:: MediSpectra, Inc.
City of Mailing Address:: Lexington
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: USA